

The Health Care Monitor

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TRICARE Northwest

Change of command



Brig. Gen.(P) Kenneth L. Farmer will move this month to Washington DC. His new duty assignment will be deputy surgeon general of the Army.

Madigan Army Medical Center—A change of command ceremony was held here June 7. Brig. Gen.(P) Kenneth L. Farmer Jr., passed the mantle of command to Colonel (P) Michael A. Dunn who is the new commanding general of the Western Regional Medical Command and TRICARE Northwest lead Agency. Dunn came from Walter Reed Health Care System where he served as commander.

Secretary of Defense Donald H. Rumsfeld announced May 6 that the President nominated Army Brig. Gen. Kenneth L. Farmer, Jr., for appointment to the rank of major general. Farmer's new position will be deputy surgeon general of the Army.



Colonel (P) Michael A. Dunn begins this month his new assignment as Lead Agent TRICARE Northwest and commanding general of the U.S. Army Medical Command's Western Region.

BG Farmer reflects on milestones accomplished on his watch

My assignment here as the Lead Agent, TRICARE Northwest/Region 11 and Commanding General, of the U.S. Army Medical Command's Western Regional Medical Command has been an extremely enjoyable and satisfying one.

Significant accomplishment included the imple-

mentation of a Department of Defense directed Pilot Project designed to achieve a much greater degree of cooperation and interaction among the Army, Navy, Air Force, and Coast Guard medical treatment facilities in the Northwest.

Providing health care

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jointly and as an integrated team, we are doing it more cost effectively. This combined with enhancements in the staff and resources at Madigan Army Medical Center this year has resulted in an increase in services avail-

able to our beneficiaries.

In March, we succeeded in transferring TRICARE oversight for Alaska from the regional headquarters in Hawaii to our TRICARE region. This has resulted in much better alignment to the way that patient referrals and con-

sultant support have already been working. Finally, we have made significant progress in exploring partnering opportunities with the Veterans Administration, state, local and regional health officials in disaster planning. This is extremely

important as we face the future challenges in the area of homeland defense.

My wife and I have thoroughly enjoyed the greater Tacoma community, and look forward to returning some day.

David R. Ray Health Center opens its doors



HM2 David R. Ray

The health center contains both the medical and dental command. (U.S. Navy Photo)



Representative Rick Larsen, Second District, Washington spoke during the dedication ceremony. (Photos by: Susie Stevens)



Ms. Pam Eisfeldt of Health Net Federal Services, marketing department helps a customer during the Open House held May 29.



Brig. Gen. Kenneth Farmer, Jr., Commanding General, Western Region Medical Command, Lead Agent, TRICARE NW Region 11 was a guest speaker at the dedication held May 30, 2002.



Ms. Janet Kahn, HNFS (above) helps answer questions by TRICARE customers who will use the new clinic. The TRICARE Service Center has moved from downtown into the new health clinic. The TSC is now open at its new location.

New health center dedication ceremony

By: Robertson, Judith
PAO Bremerton Naval Hospital

The new David R. Ray Health Clinic opened May 30 at Naval Station Everett with a ribbon-cutting ceremony.

The clinic is named in honor of Hospital Corpsman 2nd Class David R. Ray, who was killed in Vietnam in 1969 at age 24, and posthumously awarded the Medal of Honor for his actions.

A Spruance Class destroyer, stationed at Naval Station Everett had

been named in honor of the corpsman, but the destroyer was decommissioned Feb. 28, 2002.

With the decommissioning, the honor bestowed on HM2 David R. Ray would have become history.

Out of respect for the corpsman, medical officials from the Branch Medical Clinic, Everett and its parent command, Naval Hospital Bremerton endorsed a proposal by Cmdr. Todd Malloy, commanding officer of the USS David R. Ray, that the center bear his

name. The official letter giving the authority to rename the Branch Medical Clinic Everett to the David R. Ray Health Clinic came from the Office of the Chief of Naval Operations April 24.



Ms. Mary D. Bixby, sister of HM2 David R. Ray spoke during the dedication ceremony May 30. (Photos by: Susie Stevens)





Health agreements reached with Veterans Affairs



Under Secretary of Defense for Personnel and Readiness David S. C. Chu

By: Department Of Defense News Service

During a joint meeting today at the Pentagon Under Secretary of Defense for Personnel and Readiness David S. C. Chu reached agreements with Deputy Secretary of Veterans Affairs Leo MacKay on a single financial reimbursement methodology between the agencies and on a commitment to conduct joint strategic planning.

The reimbursement methodology decision will result in pursuit of a single regionally adjusted discounted rate structure for DoD-VA medical-sharing agreements. Currently, multiple methodologies are used to set reimbursement rates by the many health facilities of VA and DoD leading to complex and difficult to administer billing and collection

processes. Using a single regionally adjusted rate simplifies negotiations among facilities, clarifies reimbursement issues, accounts for local cost differences, and improves data analysis.

"This is a significant step in the right direction," said Chu. "A major obstacle to increased sharing between our two agencies has been the financial reimbursement factor. This marks the beginning of an effort that will include development of business rules, billing guides, implementation plans, accomplishing system changes, and training personnel. We are pleased with the aggressive efforts that led to this decision."

Plans call for initial implementation of this rate structure for ambulatory care services during the first quarter of fiscal 2003. Implementation for inpatient care, both facility and the professional fee components are targeted to begin in the third quarter of fiscal 2003.

At the meeting, the two senior officials also agreed to undertake an ambitious strategic planning initiative designed to develop a common vision and set of objectives for interdepartmental sharing for the future. Heralded by Mackay as a "bold move," Chu concurred, "It's the next logical step in our moving our relationship forward."



Leo S. Mackay, Jr., Ph.D., was confirmed by the Senate to be Deputy Secretary of Veterans Affairs on May 24.



Men's Health Conference- "Take Charge of your Health"

Naval Station Everett and Providence Everett Medical Center— are offering a Men's Health conference to be held at Providence Everett Medical Center in Everett, Wash. The keynote speaker at the conference will be Curt Marsh.

The conference will be held **Friday, June 28**, from 8 am –4:30 pm **Registration is required.** To register please call 1-800-554-6600. The deadline for registration is June 26.

DOD Increases emphasis on deployment health

By: U. S. Department Of Defense

Dr. William Winkenwerder Jr., assistant secretary of Defense (Health Affairs), has established the Deployment Health Support Directorate as a permanent organization and appointed Ellen P. Embrey, the deputy assistant secretary of Defense (Force Health Protection and Readiness), as its director.

"My pledge of health protection for U.S. forces is unequivocal," Winkenwerder said. "We will build on the lessons of the past and maximally utilize the resources of the Deployment Health Support Directorate, under the direction of Ellen Embrey, to achieve this essential mission." As director, Embrey will ensure the unity and ef-

fectiveness of the Defense Department's efforts to protect the health of deployed forces, Winkenwerder said.

The new directorate will build upon the considerable achievements of



Assistant Secretary of Defense for Health Affairs Dr. William Winkenwerder Jr. (DoD photo by Scott Davis, U.S. Army).

its predecessor organization, the Office of the Special Assistant for Gulf

War Illnesses, Medical Readiness and Military Deployments. Dr. Michael Kilpatrick has been interim director of that office and will continue to play a critical role in leading these efforts within the new directorate.

The Deployment Health Support Directorate is charged with understanding how the Department of Defense can best support the health and medical needs of our warfighters before, during and after military deployments. The directorate will focus on several measures DoD can take to better protect the health of deployed forces, including accurate record keeping, preventive health and research.

Through open lines of communication between DoD and servicemem-

bers, veterans and their families, the directorate serves as a conduit for contributions to deployment health policies and practices and as a bridge from the experiences of the past to the battlefields of the future. In particular, the directorate will continue its efforts to fully understand the health experiences reported by Gulf War veterans.

"Protecting the health of deployed military personnel is a paramount concern of the Department of Defense," Embrey said.

"We must do everything possible to continue to improve the protection of U.S. forces in all deployments."

New DEERS begins in 2003

By: Staff Sgt. A.J. Bosker
Air Force Print News

WASHINGTON -- The New Defense Enrollment Eligibility Reporting System, scheduled to begin in 2003, consolidates medical information from more than 120 different databases into a single one

that will benefit not only TRICARE patients but also the providers, said an Air Force surgeon general official.

"New DEERS is really a tremendous step forward," said Maj. (Dr.) Paul Friedrichs, operations branch chief of the health benefits

and policy division at Bolling Air Force Base, D.C. "It will consolidate information on eligibility, enrollment, claims processing, the primary care manager, and if enrollees have other health insurance."

Under the old system, the major

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said, the large number of databases resulted in repeated problems for patients and medical officials.

"One common example is that one database would reflect that a person was enrolled in Region 1 while another would report that (he or she was) enrolled in Region 6," Friedrichs said. "Similar conflicts between the various databases could occur, creating problems when a claim was processed or a person sought medical care."

Information on patients from all of the services, including the Coast Guard, as well as Guard, Reserve and any other agency using the TRICARE health system will

be included in the new database, said Friedrichs.

"For the first time, all military treatment facilities and TRICARE contractors will be able to access New DEERS to verify someone's eligibility for care, which is a real advantage, particularly if you're traveling," he said.

Keeping such a massive database up to date can be a daunting task, but one that Friedrichs believes is necessary.

"It improves the way we can deliver health care," he said. "We will be able to get the right information about a patient at the right time to improve (his or her) treatment, enrollment or claims processing needs. For example, providers now don't have to worry

about searching through duplicate records to find the correct lab results. This will greatly help providers give our customers the best care possible."

New DEERS is being deployed in three phases. The first, deployed in July 2001, consolidated everyone's enrollment information.

The second phase, deployed in October 2001, added the TRICARE for Life information to the database for senior enrollees (those older than 65) and anyone who qualified for Medicare.

Phase 3 will be deployed next year and will contain the remaining information regarding claims, data about other health insurance carried by enrollees, and addi-

tional administrative data, he said. Friedrichs expects full implementation of New DEERS in 2003.

"I'm a doctor by training, but I've been interested in medical information systems for a long time," he said. "(New DEERS) had probably the most successful pre-deployment testing that I've ever seen in the military. 'We spent two months testing the database by running thousands of test patient transactions prior to deploying Phase 1, and we'll do the same again before Phase 3,'" he said.

"In fact, we've already corrected hundreds of thousands of errors as we've consolidated the information," he said.

NHB physicians winners at annual conference

Physicians at Naval Hospital Bremerton's Family Practice Clinic and third-year doctors in the Family Medicine Residency program presented research projects at the annual Uniformed Services Academy of Family Physicians Scientific Assembly in Orlando Fl., and walked away with honors.

Two NHB family medicine doctors: Susanne Krasovich, MD (left) and Lt. Angela Droz, MC won first-place in the poster presentation category at the annual Uniformed Services Academy of Family Physicians Scientific Assembly in Orlando Fl. (Photo by: Lt. Christopher Orsello)



The family medicine team of Lt. Christopher Orsello, MC and Cmdr. Ronald Dommermuth, MC, won first-place for their research presentation in the Clinical Investigation category and took second-place in the poster presentation category at the conference. (Photo by: PH3 Rachel Bonilla)